Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF NEW YORK	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on	Grigory	
p e	your government-issued picture identification (for example, your driver's	First name	First name
	license or passport).	Middle name	Middle name
	Bring your picture	Shtender	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal	xxx-xx-8061	
	Individual Taxpayer Identification number (ITIN)		

Del	otor 1 Grigory Shtender		Case number (if known)				
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.				
	Include trade names and doing business as names	Business name(s)	Business name(s)				
		EINs	EINs				
5.	Where you live		If Debtor 2 lives at a different address:				
		130 Amherst Street, 2nd Floor Brooklyn, NY 11235					
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
		Kings County	County				
lf your ı above, ˈ		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		1580 East 13th Street # 2D Brooklyn, NY 11230					
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing	Check one:	Check one:				
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.				
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Deb	otor 1 Grigory Shtender					Case n	umber (if known)				
Par	t 2: Tell the Court About	Your Ban	kruptcy Ca	se							
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.									
	choosing to file under	☐ Cha	oter 7								
		■ Cha	oter 11								
		☐ Cha	oter 12								
		☐ Cha	oter 13								
8.	How you will pay the fee	al or	out how yo	u may pay. Typically, if you a attorney is submitting your p	are paying	the fee yourself, y	ne clerk's office in your local co you may pay with cash, cashie attorney may pay with a credi	r's check, or money			
				the fee in installments. If ye in Installments (Official For		e this option, sign	and attach the Application for	Individuals to Pay			
		☐ II	equest that ut is not requ	t my fee be waived (You ma uired to, waive your fee, and	ay request may do so	only if your incor	you are filing for Chapter 7. B	icial poverty line that			
							ments). If you choose this option 103B) and file it with your pe				
9.	Have you filed for bankruptcy within the	■ No.									
	last 8 years?	☐ Yes.									
			District				Case number				
			District		When		Case number				
			District		When		Case number				
10.	Are any bankruptcy cases pending or being	□No									
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ Yes.									
			Debtor	Natalya Yelin			Relationship to you	Spouse			
			District	Eastern District of	\A/I	2/25/16		1-16-40716-cec			
			District	New York	When	2/23/10	Case number, if known	1-10-40716-cec			
			Debtor District		When		Relationship to you Case number, if known				
			District		_ when		Case number, ii known				
11.	Do you rent your residence?	■ No.	Go to li	ne 12.							
		☐ Yes.	Has yo	ur landlord obtained an evict	ion judgm	ent against you ar	nd do you want to stay in your	residence?			
				No. Go to line 12.							
				Yes. Fill out <i>Initial Statemen</i> bankruptcy petition.	nt About ai	n Eviction Judgme	nt Against You (Form 101A) a	nd file it with this			

Deb	tor 1	Grigory Shtender			Case number (if known)			
Part	t 3:	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor			
12.	of an	ou a sole proprietor y full- or part-time ness?	■ No.	Go to Part 4.				
			☐ Yes.	Name and location of bu	siness			
	busin an ind separ as a d	e proprietorship is a ess you operate as dividual, and is not a ate legal entity such corporation, ership, or LLC.		Name of business, if any				
	If you sole p	have more than one proprietorship, use a rate sheet and attach		Number, Street, City, Sta	tte & ZIP Code			
	it to th	nis petition.			ox to describe your business:			
					ness (as defined in 11 U.S.C. § 101(27A))			
				☐ Single Asset Rea	I Estate (as defined in 11 U.S.C. § 101(51B))			
				☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))			
				☐ Commodity Brok	er (as defined in 11 U.S.C. § 101(6))			
				☐ None of the above	e			
13.	Chap Bank	ou filing under ter 11 of the ruptcy Code and are a small business or?	deadlines operation	are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate nes. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of ions, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure J.S.C. 1116(1)(B).				
	For a	definition of small	☐ No.	I am not filing under Cha	pter 11.			
	busin	ess debtor, see 11 C. § 101(51D).	■ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
			☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	t 4:	Report if You Own or	Have Any	Hazardous Property or Ar	ny Property That Needs Immediate Attention			
14.		ou own or have any	■ No.					
	alleg of im	erty that poses or is ed to pose a threat minent and	☐ Yes.	What is the hazard?				
	publi Or do prope	ifiable hazard to c health or safety? o you own any erty that needs diate attention?		If immediate attention is needed, why is it needed?				
	perisi livest or a b	xample, do you own hable goods, or ock that must be fed, building that needs tt repairs?		Where is the property?	Number, Street, City, State & Zip Code			
					•			

Filed 03/29/16 Entered 03/29/16 09:58:30 Case 1-16-41281-cec Doc 1 Debtor 1 Case number (if known) **Grigory Shtender** Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 2 (Spouse Only in a Joint Case): About Debtor 1: 15. Tell the court whether You must check one: You must check one: you have received a I received a briefing from an approved credit ☐ I received a briefing from an approved credit briefing about credit counseling agency within the 180 days before I counseling agency within the 180 days before I filed counseling. filed this bankruptcy petition, and I received a this bankruptcy petition, and I received a certificate of certificate of completion. completion. The law requires that you receive a briefing about Attach a copy of the certificate and the payment Attach a copy of the certificate and the payment plan, if plan, if any, that you developed with the agency. any, that you developed with the agency. credit counseling before you file for bankruptcy. I received a briefing from an approved credit ☐ I received a briefing from an approved credit You must truthfully check one of the following counseling agency within the 180 days before I counseling agency within the 180 days before I filed filed this bankruptcy petition, but I do not have choices. If you cannot do a certificate of completion. so, you are not eligible to of completion. file. Within 14 days after you file this bankruptcy Within 14 days after you file this bankruptcy petition, you petition, you MUST file a copy of the certificate and MUST file a copy of the certificate and payment plan, if If you file anyway, the court payment plan, if any. can dismiss your case, you will lose whatever filing fee I certify that I asked for credit counseling I certify that I asked for credit counseling services you paid, and your services from an approved agency, but was from an approved agency, but was unable to obtain creditors can begin unable to obtain those services during the 7 those services during the 7 days after I made my collection activities again. days after I made my request, and exigent request, and exigent circumstances merit a 30-day circumstances merit a 30-day temporary waiver temporary waiver of the requirement. of the requirement. To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the attach a separate sheet explaining what efforts you made requirement, attach a separate sheet explaining to obtain the briefing, why you were unable to obtain it what efforts you made to obtain the briefing, why before you filed for bankruptcy, and what exigent you were unable to obtain it before you filed for circumstances required you to file this case. bankruptcy, and what exigent circumstances Your case may be dismissed if the court is dissatisfied required you to file this case. with your reasons for not receiving a briefing before you filed for bankruptcy. Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a If the court is satisfied with your reasons, you must still briefing before you filed for bankruptcy. receive a briefing within 30 days after you file. You must If the court is satisfied with your reasons, you must file a certificate from the approved agency, along with a still receive a briefing within 30 days after you file. copy of the payment plan you developed, if any. If you do You must file a certificate from the approved not do so, your case may be dismissed. agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case Any extension of the 30-day deadline is granted only for may be dismissed. cause and is limited to a maximum of 15 days. Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about I am not required to receive a briefing about credit credit counseling because of: counseling because of: Incapacity. Incapacity. I have a mental illness or a mental deficiency I have a mental illness or a mental deficiency that

that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. this bankruptcy petition, but I do not have a certificate

makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Grigory Shtender				Case number (if	known)	
Par	t 6: Answer These Quest	ions for Rep	orting Purposes				
	What kind of debts do you have?		re your debts primarily consu			I in 11 U.S.C. § 101(8) as "incurred by an	
		Ι	□ No. Go to line 16b.				
		ı	Yes. Go to line 17.				
			are your debts primarily busine noney for a business or investme				
		[☐ No. Go to line 16c.				
		[Yes. Go to line 17.				
		16c. S	tate the type of debts you owe th	hat are not consum	er debts or business d	ebts	
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. G	to to line 18.			
	Do you estimate that after any exempt property is excluded and		am filing under Chapter 7. Do yo re paid that funds will be availab			is excluded and administrative expenses	
	administrative expenses	[□No				
	are paid that funds will be available for	Γ	Yes				
	distribution to unsecured creditors?						
18.	How many Creditors do	1 -49		1 ,000-5,000		□ 25,001-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000	
		☐ 100-199 ☐ 200-999		☐ 10,001-25,000		☐ More than100,000	
19.	How much do you	\$0 - \$50	.000	□ \$1,000,001 -	\$10 million	□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	□ \$50,001	- \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion	
			1 - \$500,000 1 - \$1 million	□ \$100,000,001 - \$100 million		☐ More than \$50 billion	
		— φοσο,σο	T WITHHOUT				
20.	How much do you estimate your liabilities	□ \$0 - \$50 □ \$50 000		\$ 1,000,001 -	\$500,000,001 - \$1 billion		
	to be?		- \$100,000 1 - \$500,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			1 - \$1 million	□ \$100,000,001 - \$100 million □ More than \$50 billion			
Par	t 7: Sign Below						
For	you	I have exar	nined this petition, and I declare	under penalty of pe	erjury that the informati	ion provided is true and correct.	
			osen to file under Chapter 7, I an es Code. I understand the relief			der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.	
If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to hadocument, I have obtained and read the notice required by 11 U.S.C. § 342(b).					n attorney to help me fill out this		
		I request re	lief in accordance with the chapt	ter of title 11, United	d States Code, specifie	ed in this petition.	
		bankruptcy and 3571.	case can result in fines up to \$2			roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		/s/ Grigor Grigory S	y Shtender htender		Signature of Debtor 2		
		Signature of			organication of Debitor 2		
		Executed of			Executed on		
			MM / DD / YYYY		MM / D	DD / YYYY	

Debtor 1 Grigory Shtender		Case	e number (if known)
For your attorney, if you are			informed the debtor(s) about eligibility to proceed
represented by one			xplained the relief available under each chapter lebtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.			ledge after an inquiry that the information in the
	/s/ Alla Kachan	Date	March 29, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	Alla Kachan		
	Printed name		
	Law Offices Of Alla Kachan, P.C.		
	Firm name		
	3099 Coney Island Avenue		
	3rd Floor		
	Brooklyn, NY 11235		
	Number, Street, City, State & ZIP Code		
	Contact phone (718) 513-3145	Email address	alla@kachanlaw.com
	4244281		
	Bar number & State		

Debtor 1	Grigory Shtender				\neg
Dalatano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRICT (OF NEW YORK		
Case number	_				
(if known)					☐ Check if this is an amended filing
B 104					
	 vidual Chapter 1	1 Cases: Lis	t of Creditors	Who Have	the 20 Largest
	ed Claims Agair				9
<u> </u>	od Olamis Agan	ist rou and ,	WO HOU MISIA	313	
collateral value Be as complete information.	e places the creditor among	g the holders of the 20	Diargest unsecured cla	ims. oth are equally resp	claim resulting from inadequate onsible for supplying correct
Part 1: List	the 20 Unsecured Claims i	1 Order from Largest	to Smallest. Do Not inc	nude Claims by ins	Unsecured claim
1		What is the	nature of the claim?	Credit Card	\$ \$12,641.00
Ame	x	What is the	nature of the olami.	Credit Card	Ψ ψ12,041.00
	ox 297871		te you file, the claim is tingent	: Check all that apply	1
Fort	Lauderdale, FL 33329		quidated		
			outed		
		■ Non	e of the above apply		
		Does the cre	editor have a lien on yo	ur property?	
		■ No			
Contact		Yes	. Total claim (secured ar	nd unsecured)	\$
			Value of security:	-	\$
Contact	phone		Unsecured claim		\$
2		What is the	nature of the claim?	Credit Card	\$ \$10,658.00
Ame	x	What is the		Orcan Gara	Ψ Ψ10,000.00
	ox 297871		te you file, the claim is	: Check all that apply	/
Fort	Lauderdale, FL 33329		tingent		
			quidated outed		
			outed ie of the above apply		
		- Non	o of the above apply		
		Does the cre	editor have a lien on yo	ur property?	
		■ No			
Contact		Yes	. Total claim (secured ar	nd unsecured)	\$

Contact phone

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

Value of security:

Unsecured claim

Fill in this information to identify your case:

Debtor 1	Grigory Shtender	Case number (if known)						
3		What	is the nature of the claim?	Credit Card	\$ \$1,000.00			
	Apple Bank			-	· _ 			
	First Bankcard		the date you file, the claim is:	Check all that apply				
	PO Box 8580		Contingent					
	Omaha, NE 68108		Unliquidated					
			Disputed					
			None of the above apply					
=		Does	the creditor have a lien on you	ur property?				
			No					
-	Contact		Yes. Total claim (secured and	d unsecured) \$				
			Value of security:	- \$				
_	Contact phone		Unsecured claim	\$				
4		What	is the nature of the claim?	Credit Card	\$ \$35,370.00			
	Bk Of Amer							
	Po Box 982235		the date you file, the claim is:	Check all that apply				
	El Paso, TX 79998		Contingent					
			Unliquidated					
			Disputed					
			None of the above apply					
-		Does	the creditor have a lien on you	ur property?				
			No					
_	Contact		Yes. Total claim (secured and	d unsecured) \$				
=			Value of security:	- \$				
	Contact phone		Unsecured claim	\$				
5		What	is the nature of the claim?	Credit Card	\$ \$11,636.00			
	Capital One Bank Usa N	A = =f	the data was file the eleips in	Oh a ali all that annu.				
	15000 Capital One Dr	AS OF	the date you file, the claim is: Contingent	Check all that apply				
	Richmond, VA 23238		Unliquidated					
			Disputed					
			None of the above apply					
		-	rione or and above apply					
_		Does	the creditor have a lien on you	ur property?				
			No					
_	Contact		Yes. Total claim (secured and	d unsecured) \$				
_			Value of security:	- \$				
	Contact phone		Unsecured claim	\$				
6		What	is the nature of the claim?	Credit Card	\$ \$1,723.00			
	Capital One Bank Usa N							
	15000 Capital One Dr		the date you file, the claim is:	Check all that apply				
	Richmond, VA 23238		Contingent					
			Unliquidated					
			Disputed					
			None of the above apply					
-			the creditor have a lien on vo	ır nronerty?				

Debtor	Grigory Shtender		Case number (if known) No					
		_						
	Contact	— -	Yes. Total claim (secured and	d unsecured)	\$			
	Contact	ш	Value of security:	a anocourca,	-\$			
	Contact phone		Unsecured claim		\$			
7		What	is the nature of the claim?	Credit Card		\$ \$6,768.00		
	Capital One, N.A.							
	Po Box 30273		the date you file, the claim is:	Check all that app	oly			
	Salt Lake City, UT 84130		Contingent Unliquidated					
			Disputed					
		<u>_</u>	None of the above apply					
		•	Notice of the above apply					
		Does	the creditor have a lien on you	ır property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
			Value of security:		- \$			
	Contact phone		Unsecured claim		\$			
8		What	is the nature of the claim?	Credit Card	l	\$ \$3,365.00		
	Chase Card							
	Po Box 15298		the date you file, the claim is:	Check all that app	oly			
	Wilmington, DE 19850		Contingent					
			Unliquidated Disputed					
		브	None of the above apply					
		•	Notice of the above apply					
		Does	the creditor have a lien on you	ır property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
			Value of security:		- \$			
	Contact phone		Unsecured claim		\$			
9		What	is the nature of the claim?	Credit Card		\$ \$2,489.00		
	Citi	A = = f	the data varifie the claim is:	Chaple all that any	a.b.,			
	Po Box 6241		the date you file, the claim is: Contingent	Check all that app	ЛУ			
	Sioux Falls, SD 57117		Unliquidated					
		ä	Disputed					
		■	None of the above apply					
		Does	the creditor have a lien on you	ır property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
			Value of security:		- \$			
	Contact phone		Unsecured claim		\$			
10	<u> </u>	What	is the nature of the claim?	Credit Card		\$ \$62,281.72		
	Citibank			O				
	P.O. Box 6241	As of □	the date you file, the claim is: Contingent	Cneck all that app	ЭΙУ			
	Sioux Falls, SD 57117		Unliquidated					
			J. mquidatod					

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

Debtor 1	Grigory Shtender		Case number (if known)					
			Disputed					
			None of the above apply					
		Does	the creditor have a lien on you	ır property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
			Value of security:		- \$			
	Contact phone		Unsecured claim		»			
11	Cradit One Book No	What	is the nature of the claim?	Credit Car	d	\$_\$674.00		
	Credit One Bank Na Po Box 98875	As of	the date you file, the claim is:	Check all that a	oply			
	Las Vegas, NV 89193		Contingent					
			Unliquidated					
			Disputed					
			None of the above apply					
		Does	the creditor have a lien on you	ır property?				
			No					
•	Contact		Yes. Total claim (secured and	d unsecured)	\$			
			Value of security:		- \$			
	Contact phone		Unsecured claim		\$			
12		What	is the nature of the claim?	Credit Car	d	\$ \$111.00		
12	Credit One Bank Na			Orcan Gar	<u> </u>	Ψ Ψ111.00		
	Po Box 98875		the date you file, the claim is:	Check all that a	oply			
	Las Vegas, NV 89193		Contingent					
			Unliquidated					
			Disputed None of the above apply					
			None of the above apply					
•		Does	the creditor have a lien on you	ır property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
	Contact phone		Value of security: Unsecured claim		- \$			
	Contact phone		Onsecured claim		Ψ			
13		What	is the nature of the claim?	Credit Car	d	\$ \$337.00		
	Fnb Omaha			0				
	Po Box 3412	As of	the date you file, the claim is: Contingent	Check all that a	oply			
	Omaha, NE 68103		Unliquidated					
		ä	Disputed					
			None of the above apply					
		Does	the creditor have a lien on you	ur property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
		Ц	Value of security:		- \$ ——			
	Contact phone		Unsecured claim		\$			

Debtor	Grigory Shtender	Case number (if known)						
14	l	What	is the nature of the claim?	Federal, 20	13	\$ _\$12,776.97		
	IRS	As of	the date you file, the claim is:	Chack all that an	nlv			
	PO BOX 9941		Contingent	Crieck all triat ap	рıy			
	Stop 5300 Ogden, UT 84409-0941		Unliquidated					
	Ogden, 01 84409-0941		Disputed					
			None of the above apply					
		_	тини от тини от от отругу					
		Does the creditor have a lien on your property?						
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
		_	Value of security:		- \$			
	Contact phone		Unsecured claim		\$			
15		What	is the nature of the claim?	Credit Card	1	\$ \$451.00		
	Lexus Fsb				-			
	Po Box 108	As of	the date you file, the claim is:	Check all that ap	ply			
	Saint Louis, MO 63166		Contingent					
			Unliquidated					
			Disputed					
			None of the above apply					
		Does	the creditor have a lien on you					
			No					
	Contact		Yes. Total claim (secured and	ed and unsecured) \$				
	Contact		Value of security:	a a	- \$			
	Contact phone		Unsecured claim		\$			
16		What is the nature of the claim? Medicare				\$ \$300,000.00		
10		Wilat	is the nature of the claim?	Overpayme	ent	Ψ \$300,000.00		
	National Goverment Servi							
	PO Box 6160		the date you file, the claim is:	Check all that ap	ply			
	Indianapolis, IN 46206		Contingent					
			Unliquidated					
		_	Disputed					
			None of the above apply					
		Does	the creditor have a lien on you	ur property?				
			No					
	Contact		Yes. Total claim (secured and	d unsecured)	\$			
			Value of security:		- \$			
	Contact phone		Unsecured claim		\$			
17	1	What	is the nature of the claim?	Medicare o	vernavm	ent \$ \$539,653.16		
-17	National Goverment Servic	TTIIAL	Hataro or the orain:	Medicale 0	vei payiii	Ψ ΨΟΟΘ,ΟΟΟ.10		
	PO Box 6160	As of	the date you file, the claim is:	Check all that an	ply			
	Indianapolis, IN 46206		Contingent		. ,			
			Unliquidated					
			Disputed					
		_	None of the above apply					
			the creditor have a lien on ve	ir proporty?				
		Does ■	the creditor have a lien on you No	ur property:				

ebtor 1	Grigory Shtender		Case number (if known)							
	Contact Contact phone		Yes. Total claim (secured and Value of security: Unsecured claim	d unsecured)	\$ - \$ 					
	NVO Dant of Tan and Fin	What	is the nature of the claim?	State, 201	3	\$ \$987.62				
	NYS Dept of Tax and Fin W A HarrimanCampus	As of	the date you file, the claim is:	Check all that a	oply					
	Albany, NY 12227-0001		Contingent							
	,		Unliquidated							
			Disputed							
			None of the above apply							
		Does	the creditor have a lien on you	ur property?						
			No							
	Contact		Yes. Total claim (secured and	d unsecured)	\$					
			Value of security:		- \$					
	Contact phone		Unsecured claim		\$					
		What	is the nature of the claim?	Credit Car	d	\$ \$5,964.00				
	Syncb/Pc Richard Po Box 965036	As of	the date you file, the claim is:	Check all that a	vlac					
	Orlando, FL 32896		Contingent	Oncor an mar a	PP1)					
	5 nanas, 1 2 52555		Unliquidated							
			Disputed							
			None of the above apply							
		Does	the creditor have a lien on you							
			No							
	Contact		Yes. Total claim (secured and	d unsecured)	\$					
	Ocatest above		Value of security:		- \$					
	Contact phone		Unsecured claim		Ф					
		What	is the nature of the claim?	2015 Lexu AUTO-LEA		\$ \$14,699.00				
	Toyota Motor Credit Co	A = -(die determine Me die elektrike	Object to all the steel	L -					
	1000 Bridgeport Ave # 4t	As of	the date you file, the claim is: Contingent	Check all that a	ppiy					
	Shelton, CT 06484		Unliquidated							
			Disputed							
			None of the above apply							
		Does	the creditor have a lien on you	ır property?						
			No							
	Contact	_	Yes. Total claim (secured and	\$ \$14,69	99.00					
			Value of security:	,	- \$ \$0.00					
	Contact phone		Unsecured claim		\$ \$14,69	99.00				
t 2:	Sign Below									
der r	enalty of perjury, I declare that the i	information	provided in this form is true an	nd correct.						
/s/	Grigory Shtender		x							

Debtor 1	Grigory Shtender	Case number (if known)	
	ory Shtender ture of Debtor 1	Signature of Debtor 2	
Date	March 29, 2016	Date	

Fill	in this information to identify your case:			
Deb	otor 1 Grigory Shtender			
Deb	First Name Middle Name Last Name			
1	use if, filing) First Name Middle Name Last Name			
Unit	ted States Bankruptcy Court for the: EASTERN DISTRICT OF NEW YORK			
Cas (if kno	se numberown)		_	c if this is an
			amen	ded filing
∩ff	ficial Form 106Sum			
	mmary of Your Assets and Liabilities and Certain Statistical Inform	nation		12/15
infor your	is complete and accurate as possible. If two married people are filing together, both are equally respond to the information on this form. If you are filing together, both are equally respond to the information on this form. If you are filing together, both are equally respond to the information on this form. If you are filing together, both are equally respond to the information of this page.			
Part	t1: Summarize Your Assets			
			Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	30,600.00
	1c. Copy line 63, Total of all property on Schedule A/B		\$	30,600.00
Part	t 2: Summarize Your Liabilities			
				abilities
			Amoun	t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	edule D	\$	29,067.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	13,764.59
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	995,121.88
	Your total	liabilities	S	1,037,953.47
Part	t 3: Summarize Your Income and Expenses			•
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	9,012.10
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	7,839.80
Part	t 4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the co	urt with your	other sc	hedules.
7.	■ Yes What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual prhousehold purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	imarily for a	personal	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. the court with your other schedules.	Check this b	oox and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Debtor 1 Grigory Shtender Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,800.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	13,764.59
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	13,764.59

Fill in	this inform	ation to identify your	case and this filing:			
Debtor	· 1	Grigory Shtende	Middle Name	Last Name		
Debtor	. 2	THOCK NAME	Wildale Harrie	East Name		
(Spouse,		First Name	Middle Name	Last Name		
United	States Banl	kruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case r	number					☐ Check if this is an
Oasc I						☐ Check if this is an amended filing
Offic	ial For	m 106A/B				
			ortv			4044
		A/B: Prop				12/15
think it f	its best. Be	as complete and accura space is needed, attach	ate as possible. If two marri	once. If an asset fits in more than o ed people are filing together, both a rm. On the top of any additional pag	re equally responsible for	supplying correct
Part 1:	Describe E	ach Residence, Buildin	g, Land, or Other Real Estat	e You Own or Have an Interest In		
1. Do v o	ou own or ha	ve any legal or equitabl	e interest in any residence.	building, land, or similar property?		
.	0 . 5					
	o. Go to Part 2 es. Where is t					
L Y€	es. vvnere is t	ne property?				
Part 2:	Describe Y	our Vehicles				
someor	ne else drive	s. If you lease a vehic		chicles, whether they are register Unle G: Executory Contracts and Unles		vehicles you own that
□ N	0					
■ Ye	es					
3.1	Make:		Who has an inte	rest in the property? Check one		claims or exemptions. Put ured claims on Schedule D:
	Model:		■ Debtor 1 only			laims Secured by Property.
	Year:		☐ Debtor 2 only		Current value of the	Current value of the
	Approximate	mileage:	Debtor 1 and	Debtor 2 only	entire property?	portion you own?
	Other informa	ition:	☐ At least one of	f the debtors and another		
:	2015 Lexu	s RX350,			40.00	44.44
4	AUTO-LEA	ASE	Check if this (see instruction	is community property	\$0.00	\$0.00
				,		
4. Wat e	ercraft, airc	raft, motor homes, A	TVs and other recreatio	nal vehicles, other vehicles, and	d accessories	
				ssels, snowmobiles, motorcycle a		
■ N	0					
□ Ye	es					
5 Add	d the dollar ies vou hav	value of the portion e attached for Part 2	you own for all of your e . Write that number here	entries from Part 2, including an	y entries for =>	\$0.00
4-3	, ,					
Part 3:	Describe Y	our Personal and Hous	ehold Items			
Do you	u own or ha	ive any legal or equit	able interest in any of th	ne following items?		Current value of the portion you own? Do not deduct secured claims or examptions
6. Hou	sehold goo	ds and furnishings				claims or exemptions.

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

De	btor 1	Grigory Sht	ender Case number (if known)	
	Yes.	Describe		
			Household Goods and Furnishings	\$800.00
	E lectro r <i>Exampl</i> ■ No	es: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music c I phones, cameras, media players, games	ollections; electronic devices
	☐ Yes.	Describe		
			I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, ions, memorabilia, collectibles	or baseball card collections;
		Describe		
		ent for sports a les: Sports, photo musical instr	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
		Describe		
	■ No		s, shotguns, ammunition, and related equipment	
	□ 163.	Describe		
	□ No		othes, furs, leather coats, designer wear, shoes, accessories	
			Wearing Apparel	\$500.00
	□ No ·		ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g	gold, silver
			One gold wedding band, bylgari watch fifa 100 years	\$1,500.00
	<i>Exam</i> µ ■ No	rm animals bles: Dogs, cats, Describe	birds, horses	
	Any ot ■ No	her personal ar	nd household items you did not already list, including any health aids you did not list	
		Give specific in	formation	
15			of all of your entries from Part 3, including any entries for pages you have attached number here	\$2,800.00
Pa	rt 4: De	scribe Your Finar	ncial Assets	
Do	you ov	vn or have any	legal or equitable interest in any of the following?	Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property page 2

claims or exemptions.

Debtor 1	Grigory Shtender		Case number (if known)	
☐ No	nples: Money you have in your wallet, in your hor	•	and when you file your petition	
			Cash on Hand	\$300.00
	sits of money nples: Checking, savings, or other financial accounts institutions. If you have multiple accounts in the country of the countr		in credit unions, brokerage houses, and	other similar
_		Institution name:		
	17.1.	Checking account at Ch	ase Bank #1877	\$100.00
	17.2.	Checking Account at A	ople BANK #5073	\$3,000.00
Exam ■ No	s, mutual funds, or publicly traded stocks inples: Bond funds, investment accounts with broken		nts	
9. Non- p	oublicly traded stock and interests in incorpor venture		esses, including an interest in an LLC	, partnership, and
_	. Give specific information about them		% of ownership:	
	Grigory Shtender Ph	ysician PC	%	\$0.00
	South Brooklyn Med	ical, PC	%	\$1,500.00
	Dynamic Health Reh	ab Center	%	\$1,000.00
	Flatbush Medical Pla	ıza	%	\$1,500.00
Nego Non-r ■ No	rnment and corporate bonds and other negot stiable instruments include personal checks, cash negotiable instruments are those you cannot trans. Give specific information about them	niers' checks, promissory notes, an	d money orders.	
	Issuer name:			
	ement or pension accounts apples: Interests in IRA, ERISA, Keogh, 401(k), 40	3(b), thrift savings accounts, or oth	ner pension or profit-sharing plans	
■ Yes	. List each account separately. Type of account:	Institution name:		
		IRA at Citi Bank		\$17,000.00
		Pension plan at CitiBan	k, Keogh	\$200.00

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1 Grigory Shten		Grigory Shtender	tender Case number (if known)					
			TIAA-CREF Retirement Plan	\$1,200.00				
22.	Your s Examp		s ou have made so that you may continue service or use from a company ds, prepaid rent, public utilities (electric, gas, water), telecommunications of	companies, or others				
	□ No ■ Yes.		Institution name or individual:					
			Security Deposit with Landlord for the apartment located at 130 Amherst Street, Floor, Brooklyn NY 11235	\$2,000.00 , 2nd				
23.	_	ies (A contract for a periodic p	payment of money to you, either for life or for a number of years)					
	■ No □ Yes	lssuer name ar	nd description.					
24.	26 U.S.	ts in an education IRA, in an C. §§ 530(b)(1), 529A(b), and	account in a qualified ABLE program, or under a qualified state tuiti 529(b)(1).	ion program.				
	■ No □ Yes	Institution name	e and description. Separately file the records of any interests.11 U.S.C. §	521(c):				
25.	Trusts,	, equitable or future interest	s in property (other than anything listed in line 1), and rights or power	ers exercisable for your benefit				
	☐ Yes.	Give specific information abo	ut them					
26.			rade secrets, and other intellectual property websites, proceeds from royalties and licensing agreements					
		Give specific information abo	ut them					
27.	Examp	es, franchises, and other ge ples: Building permits, exclusive	neral intangibles ve licenses, cooperative association holdings, liquor licenses, professional	l licenses				
	■ No □ Yes.	Give specific information abo	ut them					
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.				
28.	Tax ref	unds owed to you						
	■ No □ Yes.	Give specific information abou	ut them, including whether you already filed the returns and the tax years.					
29.		support bles: Past due or lump sum ali	mony, spousal support, child support, maintenance, divorce settlement, p	roperty settlement				
	■ No □ Yes.	Give specific information						
30.		amounts someone owes you oles: Unpaid wages, disability in benefits; unpaid loans yo	insurance payments, disability benefits, sick pay, vacation pay, workers'	compensation, Social Security				
	■ No □ Yes.	Give specific information						
31.	Examp	ts in insurance policies bles: Health, disability, or life in	nsurance; health savings account (HSA); credit, homeowner's, or renter's	insurance				
	■ No □ Yes.		v of each policy and list its value. ny name: Beneficiary:	Surrender or refund				
Off	icial Forr	n 106A/B	Schedule A/B: Property	page 4				

Debtor	Grigory Shtender	Case number (if known)		
			value:	
If y	y interest in property that is due you from someone who has died you are the beneficiary of a living trust, expect proceeds from a life insumeone has died.	rance policy, or are currently entitled to rece	eive property because	
	es. Give specific information			
_Ex	aims against third parties, whether or not you have filed a lawsuit of amples: Accidents, employment disputes, insurance claims, or rights to			
■ N □ Y	No /es. Describe each claim			
34. O th	her contingent and unliquidated claims of every nature, including	counterclaims of the debtor and rights to	set off claims	
	vo ∕es. Describe each claim			
35. An y	y financial assets you did not already list			
ΠY	es. Give specific information			
	dd the dollar value of all of your entries from Part 4, including any or Part 4. Write that number here		\$27,800.00	
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In.	List any real estate in Part 1.		
37. Do y	you own or have any legal or equitable interest in any business-related pro	perty?		
■ No	o. Go to Part 6.			
☐ Ye	es. Go to line 38.			
Part 6:	Describe Any Farm- and Commercial Fishing-Related Property You Own of If you own or have an interest in farmland, list it in Part 1.	or Have an Interest In.		
46. Do	you own or have any legal or equitable interest in any farm- or co	mmercial fishing-related property?		
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You Did N	ot List Above		
	you have other property of any kind you did not already list? kamples: Season tickets, country club membership			
■ N				
ПΥ	es. Give specific information			
54. A	dd the dollar value of all of your entries from Part 7. Write that nur	nber here	\$0.00	

Official Form 106A/B Schedule A/B: Property page 5

Deb	tor 1 Grigory Shtender		Case number (if known)	
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$0.00
56.	Part 2: Total vehicles, line 5	\$0.00		
57.	Part 3: Total personal and household items, line 15	\$2,800.00		
58.	Part 4: Total financial assets, line 36	\$27,800.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$30,600.00	Copy personal property total	\$30,600.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$30,600.00

Official Form 106A/B Schedule A/B: Property page 6

Ħ	ll in this inforn	nation to identify your case:								
	ebtor 1	Grigory Shtender								
		First Name	Middle Name	L	ast Name					
	ebtor 2 oouse if, filing)	First Name	Middle Name	L	ast Name					
Ur	nited States Ba	nkruptcy Court for the: EAS	STERN DISTRICT OF N	EW Y	ORK					
	ase number _ known)					Check if this is an amended filing				
\frown	fficial Ea	rm 106C								
		<u>rm 106C</u>		•						
<u>></u>	cnedui	e C: The Prope	erty You Cla	um	as Exempt	12/15				
the nee cas	property you li eded, fill out an se number (if ki	sted on Schedule A/B: Propend attach to this page as many nown).	ty (Official Form 106A/B) copies of <i>Part 2: Addition</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and				
spe any fun exe	ecific dollar ar y applicable so lds—may be u emption to a p	nount as exempt. Alternative tatutory limit. Some exemption Inlimited in dollar amount. He	ely, you may claim the fons—such as those for owever, if you claim an	ull fai heal exen	ir market value of the property be th aids, rights to receive certain b nption of 100% of fair market valu	One way of doing so is to state a sing exempted up to the amount of penefits, and tax-exempt retirement are under a law that limits the t, your exemption would be limited				
Pa	art 1: Identi	fy the Property You Claim as	Exempt							
1.	Which set of	f exemptions are you claimin	g? Check one only, eve	n if yo	our spouse is filing with you.					
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)									
	■ You are cl	aiming federal exemptions. 1	1 U.S.C. § 522(b)(2)							
2.		For any property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below.								
		ion of the property and line on	Specific laws that allow exemption							
	Schedule A/B	that lists this property	portion you own Copy the value from Schedule A/B	Check only one box for each exemption.						
		Goods and Furnishings	\$800.00		\$800.00	11 U.S.C. § 522(d)(3)				
	Line from Sc.	hedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					
	Wearing A		\$500.00		\$500.00	11 U.S.C. § 522(d)(3)				
	Line from Schedule A/B: 11.1				100% of fair market value, up to any applicable statutory limit					
	One gold w	vedding band, bvlgari	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(4)				
		hedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit					
	Cash on Ha		\$300.00		\$300.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 16.1				100% of fair market value, up to any applicable statutory limit					
		account at Chase Bank	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)				
	#1877 Line from Sc.	hedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit					

Official Form 106C

Debtor 1 Grigory Shtender Case number (if known)						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim	Specific laws that allow exemption	
	Checking Account at Apple BANK	Schedule A/B	0.10		11 U.S.C. § 522(d)(5)	
	#5073	\$3,000.00		\$3,000.00	11 0.3.6. § 322(u)(3)	
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit		
	South Brooklyn Medical, PC Line from Schedule A/B: 19.2	\$1,500.00 ■		\$1,500.00	11 U.S.C. § 522(d)(5)	
				100% of fair market value, up to any applicable statutory limit		
	Dynamic Health Rehab Center Line from Schedule A/B: 19.3	\$1,000.00		\$1,000.00	11 U.S.C. § 522(d)(5)	
				100% of fair market value, up to any applicable statutory limit		
	Flatbush Medical Plaza Line from Schedule A/B: 19.4	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(5)	
	Zine nem eshedale 702. Tet 1			100% of fair market value, up to any applicable statutory limit		
	IRA at Citi Bank Line from Schedule A/B: 21.1	\$17,000.00		\$17,000.00	11 U.S.C. § 522(d)(12)	
				100% of fair market value, up to any applicable statutory limit		
	Pension plan at CitiBank, Keogh Line from Schedule A/B: 21.2	\$200.00		\$200.00	11 U.S.C. § 522(d)(12)	
				100% of fair market value, up to any applicable statutory limit		
	TIAA-CREF Retirement Plan Line from Schedule A/B: 21.3	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(12)	
	Ellie Holli Golloddio 772. 2 No			100% of fair market value, up to any applicable statutory limit		
	Security Deposit with Landlord for the apartment located at 130	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)	
	Amherst Street, 2nd Floor, Brooklyn NY 11235 Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit		
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every ■ No □ Yes. Did you acquire the property covers □ No □ Yes	3 years after that for ca	ases fi	,	,	

Official Form 106C

Fill in this informa	ation to identify you	ır case:			
Debtor 1	Grigory Shtend	er			
	First Name	Middle Name Last Name			
Debtor 2					
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Bank	kruptcy Court for the	EASTERN DISTRICT OF NEW YORK			
C					
Case number				☐ Check	if this is an
					led filing
					Ü
Official Form	106D				
Schedule [D: Creditors	Who Have Claims Secure	ed by Propert	V	12/15
Be as complete and a	accurate as possible.	If two married people are filing together, both are out, number the entries, and attach it to this form.	equally responsible for su	pplying correct informa	
1. Do any creditors h	ave claims secured by	y your property?			
☐ No. Check t	this box and submit t	his form to the court with your other schedules.	You have nothing else to	o report on this form.	
_	all of the information	ŕ	J	,	
		bolow.			
	Secured Claims		. Column A	Column B	Column C
		more than one secured claim, list the creditor separates a particular claim, list the other creditors in Part 2. As		Value of collateral	Unsecured
		cal order according to the creditor's name.	Do not deduct the	that supports this	portion
2.1 Ally Financ	ial	Describe the property that secures the claim:	value of collateral. \$14,368.00	claim Unknown	If any Unknown
Creditor's Name		Auto Lease	1		
		Co-Signer			
		As of the date you file, the claim is: Check all that			
200 Renais		apply.			
Detroit, MI		Contingent			
Number, Street, C	City, State & Zip Code	Unliquidated			
Who owes the deb	t? Check one	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only		☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)			
Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this clai	im relates to a	Other (including a right to offset)			
community deb	t	,			
Date debt was incur	Opened 5/11/15 Last Active 7/10/15	Last 4 digits of account number 647	1		
		-			
2.2 Toyota Mot	tor Credit Co	Describe the property that secures the claim:	\$14,699.00	\$0.00	\$14,699.00
Creditor's Name		2015 Lexus RX350, AUTO-LEASE			
1000 Brida	eport Ave # 4t	As of the date you file, the claim is: Check all that	I		
Shelton, C		apply.			
	City, State & Zip Code	☐ Contingent ☐ Unliquidated			
rainber, Sueet, C	5.1, Julio & Zip 0006	☐ Disputed			
Who owes the deb	t? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or	secured		
Debtor 2 only		car loan)			
☐ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			

Official Form 106D

Debtor 1	Grigory SI	ntender			Case numbe	r (if know)		
_	First Name	Middle Na	ame Last Name			-		
	f this claim re unity debt	elates to a	■ Other (including a right to offset	:)				
Date debt w	vas incurred	Opened 2/17/15 Last Active 7/12/15	Last 4 digits of account no	umber W59	5	-		
If this is t		of your form, add	olumn A on this page. Write that n the dollar value totals from all pag			\$29,067.0 \$29,067.0	_	

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this info	rmation to identify your c	ase:				
Debtor 1	Grigory Shtender					
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	EASTERN DISTRICT (OF NEW YORK			
Case number (if known)					_	if this is an led filing
Official Fo	rm 106F/F					
	E/F: Creditors W	no Have Unsec	ured Claims			12/15
Schedule D: Cred left. Attach the C name and case n	cutory Contracts and Unexpin ditors Who Have Claims Secu ontinuation Page to this page umber (if known). All of Your PRIORITY Uns	red by Property. If more s . If you have no informati	pace is needed, copy the Par	you need, fill it out,	number the entries in	n the boxes on the
	itors have priority unsecured					
☐ No. Go to	• •					
Yes.						
identify what possible, list	our priority unsecured claims. type of claim it is. If a claim has the claims in alphabetical order than one creditor holds a par	both priority and nonpriorit according to the creditor's	y amounts, list that claim here a name. If you have more than tw	and show both priority a	ind nonpriority amount	ts. As much as
(For an expla	anation of each type of claim, se	e the instructions for this fo	rm in the instruction booklet.)	Total claim	Priority	Nonpriority
2.1 IRS		Last 4 dinits o	of account number	\$12,776.97	amount \$12.776.97	amount \$0.00
Priority	Creditor's Name		debt incurred?		φ12,770.97	φυ.υυ
Stop (Ogder	5300 n, UT 84409-0941				-	
	Street City State Zlp Code	As of the date	you file, the claim is: Check a	all that apply		
_	red the debt? Check one.	☐ Contingent				
Debtor	1 only	☐ Unliquidate	d			
Debtor 2	2 only	☐ Disputed				
☐ Debtor	1 and Debtor 2 only	Type of PRIO	RITY unsecured claim:			
☐ At least	one of the debtors and another	☐ Domestic s	upport obligations			
☐ Check i	f this claim is for a communi	ty debt Taxes and	certain other debts you owe the	government		
Is the clain	n subject to offset?	☐ Claims for o	death or personal injury while yo	ou were intoxicated		
■ No		Other. Spe				
☐ Yes			Federal, 2013			

Debto	Grigory Shtender		Case number (if know)	
2.2	NYS Dept of Tax and Fin	Last 4 digits of account number	\$987.62	\$987.62 \$0.00
	Priority Creditor's Name W A HarrimanCampus Albany, NY 12227-0001	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim is:	Check all that apply	
W	/ho incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	☐ Unliquidated		
	Debtor 2 only	☐ Disputed		
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	At least one of the debtors and another	☐ Domestic support obligations		
	Check if this claim is for a community debt	■ Taxes and certain other debts you□ Claims for death or personal injury	•	
_	■ No	☐ Other. Specify		
	Yes	State, 2013		
Part 2	List All of Your NONPRIORITY Unsecu	rad Claims		
_	any creditors have nonpriority unsecured claim			
ш	No. You have nothing to report in this part. Submit	this form to the court with your other sche	edules.	
	Yes.			
uns tha	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each cl in one creditor holds a particular claim, list the other rt 2.	aim. For each claim listed, identify what t	type of claim it is. Do not list claims alrea	ady included in Part 1. If more
ια				Total claim
4.1	Amex	Last 4 digits of account number	3543	\$12,641.00
	Nonpriority Creditor's Name	-		
	Po Box 297871 Fort Lauderdale, FL 33329	When was the debt incurred?	Opened 11/08/99 Last Activ 5/01/12	/e
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did	d not
	Is the claim subject to offset?	report as priority claims	a plane, and other similar debts	
	■ No	☐ Debts to pension or profit-sharin	•	
	☐ Yes	Other. Specify Credit Card	I	

Debtor	¹ Grigory Shtender		Case number (if know)	
4.2	Amex Nonpriority Creditor's Name	Last 4 digits of account number	4863	\$10,658.00
	Po Box 297871 Fort Lauderdale, FL 33329	When was the debt incurred?	Opened 4/26/99 Last Active 5/01/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.3	Apple Bank	Last 4 digits of account number	2652	\$1,000.00
	Nonpriority Creditor's Name First Bankcard	When was the debt incurred?		
	PO Box 8580			
	Omaha, NE 68108 Number Street City State Zlp Code	As of the date you file, the claim i	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you file, the claim	з. Спеск ан тас арргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card	<u> </u>	
4.4	Bk Of Amer Nonpriority Creditor's Name	Last 4 digits of account number	8814	\$35,370.00
	Po Box 982235	When was the debt incurred?	Opened 5/27/99 Last Active 6/01/12	
	El Paso, TX 79998 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.	, , , , , , , , , , , , , , , , , , , ,	or chook an unat apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card		

Debto	or 1 Grigory Shtender		Case number (if know)	
4.5	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	5628	\$11,636.00
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 4/15/05 Last Active 5/09/14	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit Card	<u> </u>	
4.6	Capital One Bank Usa N Nonpriority Creditor's Name	Last 4 digits of account number	8044	\$1,723.00
	15000 Capital One Dr Richmond, VA 23238	When was the debt incurred?	Opened 1/22/11 Last Active 7/10/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.7	Capital One, N.A. Nonpriority Creditor's Name	Last 4 digits of account number	6632	\$6,768.00
	Po Box 30273 Salt Lake City, UT 84130	When was the debt incurred?	Opened 12/15/05 Last Active 6/01/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	■ Other. Specify Credit Card		

Debtor	Grigory Shtender		Case number (if know)	
4.8	Chase Card Nonpriority Creditor's Name	Last 4 digits of account number	3198	\$3,365.00
	Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 12/28/00 Last Active 5/01/12	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	<u> </u>	
4.9	Citi Nonpriority Creditor's Name	Last 4 digits of account number	0572	\$2,489.00
	Po Box 6241 Sioux Falls, SD 57117	When was the debt incurred?	Opened 12/08/11 Last Active 7/13/15	
	Number Street City State ZIp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Citibank Neppriority Creditoria Name	Last 4 digits of account number	2981	\$62,281.72
	Nonpriority Creditor's Name P.O. Box 6241 Sioux Falls, SD 57117	When was the debt incurred?		
	Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	□Yes	■ Other. Specify Credit Card	l	

Debtor	1 Grigory Shtender		Case number (if know)	
4.1	Credit One Bank Na	Last 4 digits of account number	1588	\$674.00
	Nonpriority Creditor's Name Po Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 6/14/13 Last Active 7/12/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Credit One Bank Na Nonpriority Creditor's Name	Last 4 digits of account number	1960	\$111.00
	Po Box 98875 Las Vegas, NV 89193	When was the debt incurred?	Opened 8/31/14 Last Active 8/04/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1	Fnb Omaha Nonpriority Creditor's Name	Last 4 digits of account number	5457	\$337.00
	Po Box 3412 Omaha, NE 68103	When was the debt incurred?	Opened 3/01/12 Last Active 7/07/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharin		
	Yes	Other. Specify Credit Card		

Debt	or 1 Grigory Shtender		Case number (if know)	
4.1 4	Lexus Fsb	Last 4 digits of account number	8699	\$451.00
	Nonpriority Creditor's Name			
	Po Box 108 Saint Louis, MO 63166	When was the debt incurred?	Opened 9/01/07 Last Active 7/23/15	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only□ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 5	National Goverment Servi	Last 4 digits of account number		\$300,000.00
	Nonpriority Creditor's Name PO Box 6160 Indianapolis, IN 46206	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medicare O	verpayment	
4.1 6	National Government Servic	Last 4 digits of account number	7094	\$539,653.16
	Nonpriority Creditor's Name PO Box 6160 Indianapolis, IN 46206	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	■ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other Specify Medicare o	verpayment	

Syncb/Pc Richard	Last 4 digits of account number	1285	\$5,964.00
Nonpriority Creditor's Name	_		
Po Box 965036	When was the debt incurred?	Opened 3/08/01 Last Active	
Orlando, FL 32896	when was the dept incurred?	7/12/15	
Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	■ Other. Specify Credit Card	I	

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 13,764.59
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 13,764.59
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 995,121.88
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 995,121.88

Fill in this information to identify your case:					
Debtor 1	Grigory Shtender	•			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F NEW YORK		
Case number					
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Ally Financial 200 Renaissance Ctr Detroit, MI 48243	Acct# 103922696471 Opened 5/11/15 AutoLease, CO-SIGNER
2.2	Liza Young 32 Essex Road Great Neck, NY 11023	Rent of 2bedroom apartment located at 130 Amherst Street, 2nd Floor, Brooklyn NY 11235
2.3	Petbro Management Co 5418 5th Ave Brooklyn, NY 11220	Rent of 2bedroom apartment located at 1580 E 13th Street, Apt. 2D, Brooklyn, NY 11230
2.4	Toyota Motor Credit Co 1000 Bridgeport Ave # 4t Shelton, CT 06484	Acct# 20492JW595 Opened 2/17/15 AutoLease

Official Form 106G

Fill in this in	formation to identify your	case:			
Debtor 1	Grigory Shtender	•			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
		EASTERN DISTRICT O	E NEW YORK		
United States	s Bankruptcy Court for the:	EASTERN DISTRICT O	F NEW TORK		
Case numbe	r				
(if known)					Check if this is an amended filing
					amended ming
Official I	Form 106H				
Schedu	ile H: Your Cod	ebtors			12/15
ill it out, and our name a	I number the entries in the nd case number (if known)	boxes on the left. Attach . Answer every question	the Additional Page :	to this page. On the top	eded, copy the Additional Page, of any Additional Pages, write
1. Do yo	ou have any codebtors? (If	you are filing a joint case,	do not list either spouse	e as a codebtor.	
■ No					
☐ Yes					
Arizona,	n the last 8 years, have you California, Idaho, Louisiana to to line 3.				states and territories include
_	Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
in line 2	again as a codebtor only i 6D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed the	with you. List the person shown e creditor on Schedule D (Official chedule E/F, or Schedule G to fil
	olumn 1: Your codebtor me, Number, Street, City, State and Z	P Code		Column 2: The cred Check all schedules	litor to whom you owe the debt that apply:
3.1				☐ Schedule D, line	
	me			☐ Schedule E/F, lin	
				☐ Schedule G, line	
Nu	mber Street			_	
Cit	у	State	ZIP Code		
3.2 Na	me			Schedule D, line	
				☐ Schedule E/F, lir☐ Schedule G, line	
	and an				
Nu Cit	mber Street y	State	ZIP Code		
	•				

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Fill	in this information to identify your c	ase:							
	otor 1 Grigory Sht								
	otor 2 use, if filing)								
Uni	ted States Bankruptcy Court for the	e: _EASTERN DISTRICT	OF NEW YORK		_				
	se number own)		-		[heck if this is: An amende A supplement	d filing ent showing		chapter
\bigcirc 1	fficial Form 106l							llowing date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
supį spoi attad	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filing wi	ng jointly, and your s ith you, do not includ	pouse i le infori	s living w nation ab	vith you, included the point your spoot your spoot out your spoot out the point in	ude inform ouse. If mo	ation about re space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or non-fil	ing spouse	
	If you have more than one job, attach a separate page with	Employment status	■ Employed	■ Employed □ Not employed			oyed mployed		
	information about additional employers.	Occupation	Self-employed			_ 1101 0	mpioyou		
	Include part-time, seasonal, or self-employed work.	Employer's name	Grigory Shtende	r Phys	ician,				
	Occupation may include student or homemaker, if it applies.	Employer's address	1580 East 13th S Apt. 2D Brooklyn, NY 11						
		How long employed the	here? <u>15 years</u>	6					
Par	t 2: Give Details About Mo	nthly Income							
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for	any line, v	write \$0 in the	space. Incl	lude your no	n-filing
	u or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	for all e	mployers	for that perso	n on the lin	es below. If	you need
					For	Debtor 1	For Deb non-filir	otor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	8,600.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	8,600.00	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	otor 1	Grigory Shtender		Case r	number (if known)			
				For	Debtor 1		Debtor 2 or	
	Coi	py line 4 here	4.	\$	8,600.00	_	filing spouse N/A	
				· —		- '		•
5.	Lis	t all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	3,787.90		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00		N/A	-
	5c. 5d.	Voluntary contributions for retirement plans Required repayments of retirement fund loans	5c. 5d.	\$ 	0.00 0.00	- :	N/A N/A	
	5e.	Insurance	5a. 5e.	\$ 	0.00	- :	N/A N/A	-
	5f.	Domestic support obligations	5f.	\$	0.00	- :	N/A	=
	5g.	Union dues	5g.	\$	0.00		N/A	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A	•
6.	Add	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	3,787.90	\$	N/A	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	4,812.10	_ \$	N/A	
8.	List 8a.	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		•		•		
	٥L	monthly net income.	8a.	\$	0.00		N/A	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	\$	0.00	_ \$	N/A	,
	8d. 8e.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. 8d. 8e.	\$ \$	0.00 0.00 0.00	\$	N/A N/A N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$	0.00		N/A	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	N/A	
	8h.	Other monthly income. Specify: Promisory note payments	8h.+	\$	200.00	+ \$	N/A	
		Personal expenses covered by business income		\$	4,000.00	_ \$	N/A	
9.	Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	4,200.00	\$	N/A	\
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	C	,012.10 +	}	N/A = \$	9,012.10
		If the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,,012.10			0,012.10
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are recify:	our depen	,	,	•	chedule J. 11. +\$	0.00
12.	Wri	d the amount in the last column of line 10 to the amount in line 11. The te that amount on the Summary of Schedules and Statistical Summary of Cellies					12. \$	9,012.10
							Combin monthly	ned y income
13.	Do ■ □	you expect an increase or decrease within the year after you file this fo No. Yes. Explain:	rm?					-
	_	·						

Official Form 106I Schedule I: Your Income page 2

Fill	in this information to identify your case:							
Deb	otor 1 Grigory Shtender		Che	ck if this is:				
Deh	otor 2			An amended filing	ving postpetition chapter			
	ouse, if filing)			13 expenses as of				
Unit	ted States Bankruptcy Court for the: _EASTERN DISTRICT OF NEV	V YORK	MM / DD / YYYY					
Cas	se number							
	known)							
0	fficial Form 106J							
S	chedule J: Your Expenses				12/15			
Be info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.	e are filing together, bo his form. On the top of	th are equancy any additi	ıally responsible fo onal pages, write y	or supplying correct your name and case			
Par 1.	rt 1: Describe Your Household Is this a joint case?							
••	No. Go to line 2.							
	☐ Yes. Does Debtor 2 live in a separate household?							
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expen</i>	nses for Separate Housel	<i>hold</i> of Del	otor 2.				
2.	Do you have dependents? ■ No							
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	•		Dependent's age	Does dependent live with you?			
	Do not state the				□ No			
	dependents names.				□ Yes □ No			
					☐ Yes			
					□ No			
					☐ Yes			
					□ No			
3.	Do your expenses include				☐ Yes			
J.	expenses of people other than yourself and your dependents?							
	rt 2: Estimate Your Ongoing Monthly Expenses							
exp	timate your expenses as of your bankruptcy filing date unles penses as of a date after the bankruptcy is filed. If this is a s plicable date.							
Inc the	clude expenses paid for with non-cash government assistand value of such assistance and have included it on Schedule	ce if you know I: Your Income		.,				
(Of	fficial Form 106l.)			Your expo	enses			
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgage	4.	\$	2,000.00			
	If not included in line 4:							
	4a. Real estate taxes		4a.	\$	0.00			
	4b. Property, homeowner's, or renter's insurance		4b.	\$	0.00			
	4c. Home maintenance, repair, and upkeep expenses		4c.		0.00			
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as 	s home equity loons	4d. 5.	·	0.00			
J.	Additional mortgage payments for your residence, Such as	HOHE EQUILY IUDITS	J.	Ψ	v.uu			

Debtor 1	Grigory Shtender	Case num	ber (if known)	
. Utilitie				
	Electricity, heat, natural gas	6a.	\$	130.00
	Water, sewer, garbage collection	6b.	·	0.00
	Telephone, cell phone, Internet, satellite, and cable services	6c.		0.00
	Other. Specify: T.V. Cable/Internet	6d.	\$	125.44
	and housekeeping supplies	ou. 7.	\$	
				800.00
	are and children's education costs	8.	\$	2,000.00
	ng, laundry, and dry cleaning	9.	\$	300.00
	nal care products and services	10.	\$	100.00
	al and dental expenses	11.	\$	0.00
	portation. Include gas, maintenance, bus or train fare. include car payments.	12.	\$	300.00
	ainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	able contributions and religious donations	14.	· ·	0.00
5. Insura	<u> </u>		*	0.00
	include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	\$	0.00
	Health insurance	15b.	·	750.00
	Vehicle insurance	15c.	· —	356.87
	Other insurance. Specify:	15d.	·	0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.	130.	Ψ	U.UU_
Specif	, , ,	16.	\$	0.00
	ment or lease payments:			
17a.	Car payments for Vehicle 1	17a.	\$	612.49
17b.	Car payments for Vehicle 2	17b.	\$	0.00
17c.	Other. Specify: IRS Instalment Plan	17c.	\$	265.00
	Other. Specify:	17d.	\$	0.00
	payments of alimony, maintenance, and support that you did not report		•	0.00
	ted from your pay on line 5, Schedule I, Your Income (Official Form 106	5 i). 10.		
	payments you make to support others who do not live with you.	19.	\$	0.00
Specif			Incomo	
	real property expenses not included in lines 4 or 5 of this form or on S Mortgages on other property	20a.		0.00
			·	0.00
	Real estate taxes	20b.	·	0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	Maintenance, repair, and upkeep expenses	20d.		0.00
	Homeowner's association or condominium dues	20e.	•	0.00
1. Other:	Specify:	21.	+\$	0.00
2. Calcu	ate your monthly expenses			
	dd lines 4 through 21.		\$	7,839.80
	opy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2	\$	- ,
	dd line 22a and 22b. The result is your monthly expenses.	_	I :	7 020 00
220. A	uu iine 22a anu 22b. The result is your monthiy expenses.		\$	7,839.80
3. Calcu	ate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.		9,012.10
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	7,839.80
230	Subtract your monthly expenses from your monthly income.			
	The result is your <i>monthly net income</i> .	23c.	\$	1,172.30
For exa	u expect an increase or decrease in your expenses within the year after mple, do you expect to finish paying for your car loan within the year or do you expect ation to the terms of your mortgage?			e or decrease because of a
■ No.				
☐ Yes				

Fill in this info	rmation to identify your	case:			
Debtor 1	Grigory Shtender				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court for the:	EASTERN DISTRICT O	NEW YORK		
Case number					
(if known)				_	Check if this is an amended filing
Official For	rm 106Dec				
		n Individual	Debtor's Sche	dules	12/15
years, or both.	gn Below		ruptcy case can result in fine	s up to \$250,000, or impri	somment for up to 20
Did you p	pay or agree to pay some	one who is NOT an attori	ney to help you fill out bankr	uptcy forms?	
■ No					
☐ Yes.	Name of person			Attach Bankruptcy Peti Declaration, and Signa	ition Preparer's Notice, ture (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sumi	nary and schedules filed wit	h this declaration and	
X /s/ Gr	igory Shtender		X		
	ory Shtender ture of Debtor 1		Signature of Debt	or 2	
Date	March 29, 2016		Date		

Official Form 106Dec

H	l in this inform	ation to identify you	r case:				
De	ebtor 1	Grigory Shtende	Middle Name		Last Name		
1 -	ebtor 2 ouse if, filing)	First Name	Middle Name		Last Name		
Ur	nited States Ban	kruptcy Court for the:	EASTERN DISTRICT	OF NEW	YORK		
Cs	se number						
	cnown)						Check if this is an amended filing
0	fficial For	m 107					
St	atement	of Financial	Affairs for Indiv	ridual	Is Filing for B	ankruptcy	12/1
info nui	ormation. If months in the mon	ore space is needed,). Answer every que	attach a separate sheet	to this fo	orm. On the top of any	equally responsible for s y additional pages, write	
1.	<u> </u>	current marital statu					
	MarriedNot marr	ied					
2.	During the la	et 3 voore have vou	lived anywhere other that	n whore	a vou live new?		
۷.	During the la	st 3 years, nave you	iived allywhere other tha	III WIICIG	e you live now :		
	■ No □ Yes. List	all of the places you I	ived in the last 3 years. Do	not inclu	ude where you live now	<i>I</i> .	
	Debtor 1 Pri	or Address:	Dates Debtor lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. sta						ity property state or terri co, Texas, Washington an	tory? (Community property d Wisconsin.)
	■ No						
	☐ Yes. Mal	ke sure you fill out Scl	nedule H: Your Codebtors	(Official I	Form 106H).		
Pa	rt 2 Explain	the Sources of You	r Income				
4.	Fill in the total	amount of income yo	nployment or from opera u received from all jobs an have income that you rece	d all bus	inesses, including part-		alendar years?
	□ No ■ Yes. Fill	in the details.					
			Debtor 1			Debtor 2	
			Sources of income Check all that apply.	(be	oss income efore deductions and clusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		year before that: cember 31, 2014)	■ Wages, commissions, bonuses, tips		\$212,367.00	☐ Wages, commissions bonuses, tips	5,
			Operating a business			☐ Operating a business	S

Official Form 107

De	Debtor 1 Grigory Shtender					Case number (if known)						
				Debtor 1					Debtor 2			
					of income that apply.	(befo	ss income ore deductions a usions)	and	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	r the calen nuary 1 to	dar year: December	31, 2013)	■ Wages bonuses,	s, commissions, tips		\$147,226	.00	☐ Wages, combonuses, tips	imissions,		
				■ Opera	iting a business				☐ Operating a	business		
5.	Include in and other	come regard public bene	dless of whe fit payments	ther that inco ; pensions; r	his year or the two ome is taxable. Exa cental income; intel have income that y	amples rest; div	of other income idends; money	are al	ed from lawsuits;	royalties; ar	security, unemployment, ad gambling and lottery	
	List each	source and	the gross inc	come from ea	ach source separa	tely. Do	not include inc	ome th	at you listed in lir	ne 4.		
	■ No											
	_	Fill in the de	etails.									
				51. 1								
				Debtor 1 Sources Describe	of income below	(befo	ss income ore deductions a usions)	and	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	rt 3: Lis	t Certain Pa	yments Yo	u Made Befo	ore You Filed for	Bankru	ptcy					
6.	Are eithe ☐ No.	Neither D individual	ebtor 1 nor primarily for	Debtor 2 ha a personal, fore you filed	rimarily consuments primarily consuments primarily consuments family, or household for bankruptcy, di	umer de ld purpo	ebts. Consumer ose."			· ·	11(8) as "incurred by an	
		☐ Yes	List below paid that on	each creditor creditor. Do r e payments t		nts for d his banl	omestic support	t obliga	ations, such as ch	ild support	he total amount you and alimony. Also, do	
	Yes.	Debtor 1	or Debtor 2	or both hav	e primarily consu	ımer de	ebts.			·		
		During the	90 days be	·	l for bankruptcy, di	d you p	ay any creditor	a total	of \$600 or more?)		
		☐ Yes	List below include pa	each credito							it creditor. Do not include payments to an	
	Creditor	's Name an	d Address		Dates of payme	ent	Total amou		Amount you still owe	Was this	payment for	
7.	Insiders in of which y a busines alimony.	nclude your o	relatives; any fficer, directo te as a sole	y general pa or, person in proprietor. 1		any ger of 20% o	ent on a debt y neral partners; p or more of their	ou ow partner	ved anyone who ships of which yo securities; and ar	u are a gene ny managing	eral partner; corporation; agent, including one fo	
		Name and		Holder	Dates of payme	ent	Total amou	nt	Amount you	Reason fo	or this payment	
					J. paymo		pa		still owe			

Official Form 107

Debt	or 1 Grigory Shtender	Case number (if known)							
									
i	Nithin 1 year before you filed for bankruptonsider? nclude payments on debts guaranteed or cos		ments or transfer a	ny property on a	ccount of a de	ebt that benefited an			
	■ No □ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment itor's name			
Part	4: Identify Legal Actions, Repossession	s, and Foreclosures							
L	Nithin 1 year before you filed for bankrupto- List all such matters, including personal injury modifications, and contract disputes.								
[NoYes. Fill in the details.								
	Case title	Nature of the case	Court or agency		Status of the	e case			
	Case number Capital One Bank (USA), N.A.vs. Grigory Shtender 63694/13	Consumer Credit Transaction	Kings Civil Supreme 360 Adams Street Brooklyn, NY 11201		☐ Pending ☐ On appeal ☐ Concluded				
					Disposed				
	Kern Augustine Conroy Schoppmann, PC vs. Grigory Shteneder, MD 539/14		Civil Court of N 141 Livingston Brooklyn, NY 1	Street	☐ Pending ☐ On appe				
	American Express vs. Grigory Shtender CV00103613KI	Consumer Credit Transaction	Kings Civil Sup 360 Adams Stre Brooklyn, NY 1	et	☐ Pending ☐ On appe				
_					Disposed				
(I	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No Yes. Fill in the information below.		erty repossessed, fo	oreclosed, garnis	shed, attached	l, seized, or levied?			
	Creditor Name and Address	Describe the Property		Date		Value of the			
		Explain what happened	I			property			
a I	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fin	ancial institutior	ı, set off any a	mounts from your			
	Creditor Name and Address	Describe the action the	creditor took	Date taker	action was	Amount			
	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a ■ No		erty in the possession	on of an assigne	e for the bene	fit of creditors, a			

Del	otor 1 Grigory Shtender			Case number (if known)					
Pai	t 5: List Certain Gifts and Contribution	ns								
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No									
	Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$60 per person	00	Describe the gifts		Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:	i								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity									
	No Nos Fill in the details for each gift or contribution									
	Yes. Fill in the details for each gift or of				Dates you	Value				
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		Describe what you contributed		Dates you contributed	value				
Pai	t 6: List Certain Losses									
15.	Within 1 year before you filed for bankru or gambling? No Yes. Fill in the details.	uptcy o	r since you filed for bankruptcy, did y	you lose anyt	hing because of thef	t, fire, other disaster				
	Describe the property you lost and	Descr	ribe any insurance coverage for the le	oss	Date of your	Value of property				
	how the loss occurred	Includ	the amount that insurance has paid. I lance claims on line 33 of Schedule A/B:	List pending	loss	lost				
Pai	t 7: List Certain Payments or Transfer	s								
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	ıptcy, d prepari	ing a bankruptcy petition?			rty to anyone you				
	No									
	Yes. Fill in the details.				_					
	Person Who Was Paid Address Email or website address	V	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment				
	Person Who Made the Payment, if Not									
17.	Within 1 year before you filed for bankru promised to help you deal with your cre Do not include any payment or transfer tha	ditors	or to make payments to your creditor		r transfer any prope	rty to anyone who				
	Yes. Fill in the details.									
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for banks transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have all No	ness or financial affairs? as security (such as the granting of a s								
	Yes. Fill in the details.									
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made				
	Person's relationship to you									

Official Form 107

Deb	ebtor 1 Grigory Shtender				Case number (if known)								
19.	benef	ficia No	years before you filed for bankrury? (These are often called asset-pare) Fill in the details.		r, did you transfer any property to a self-settled trust or similar device of which you are a tion devices.)								
			trust		Description and	value of the pro	nerty tran	sforrad	Date Transfer was				
	IVAIII	ie oi	irusi		Description and	value of the pro	perty train	Sierreu	made				
Par	t 8:	List	of Certain Financial Accounts, I	nstrur	ments, Safe Depos	it Boxes, and S	torage Uni	ts					
20.	sold, moved, or transferred? Include checking, savings, money market, or o houses, pension funds, cooperatives, associat ☐ No				her financial accou	ınts; certificate	s of depos	•	•				
	— Tes. I ili ili the details.			st 4 digits of count number	Type of acco	ount or	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
	Chase			xx	xx-7700	■ Checking □ Savings □ Money Market □ Brokerage □ Other		March, 2015 \$5000.00	\$5,000.00				
	Eastern Savings Bank			XX	xx-5776	■ Checking □ Savings □ Money Market □ Brokerage □ Other		December, 2015 Joint Checking account with father	\$200.00				
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?												
		No											
	□ '	Yes.	Fill in the details.										
			Financial Institution (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)			the contents	Do you still have it?				
22.	22. Have you stored property in a storage unit o No Yes, Fill in the details.				ace other than you	r home within	l year befo	re you filed for bankrup	otcy				
			Storage Facility (Number, Street, City, State and ZIP Code)		Who else has or to it? Address (Number, State and ZIP Code)		Describe	the contents	Do you still have it?				
Par	t 9:	Ide	ntify Property You Hold or Contro	ol for	Someone Else								
23.	Do yo		old or control any property that sone.	omeo	ne else owns? Inc	lude any prope	rty you bor	rowed from, are storing	g for, or hold in trust				
	_	No Yes.	Fill in the details.										
	Owner's Name				Where is the pro		Describe	the property	Value				
	Address (Number, Street, City, State and ZIP Code)				(Number, Street, Čity, Code)	State and ZIP							

Debtor 1 Grigory Shtender

Part 10: Give Details About Environmental Information

Case number (if known)

For	the p	ourpose of Part 10, the following definit	tions	apply:							
	toxi	rironmental law means any federal, static substances, wastes, or material into sulations controlling the cleanup of thes	the ai	r, land, soil, surface water, ground	_	•					
		e means any location, facility, or proper own, operate, or utilize it, including disp	-	-	aw,	whether you now own, operate,	or utilize it or used				
		cardous material means anything an envardous material, pollutant, contaminant			wa	ste, hazardous substance, toxic s	substance,				
Rep	ort a	ıll notices, releases, and proceedings th	hat yo	ou know about, regardless of wher	the	ey occurred.					
24.	Has	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
		■ No □ Yes. Fill in the details.									
	Na	me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice				
25.	Hav	Have you notified any governmental unit of any release of hazardous material?									
		No									
		Yes. Fill in the details.									
		me of site dress (Number, Street, City, State and ZIP Code)		Governmental unit Address (Number, Street, City, State and ZIP Code)	t	Environmental law, if you know it	Date of notice				
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.										
		No Yes. Fill in the details.									
		se Title se Number		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case				
Pai	t 11:	Give Details About Your Business or	r Con	nections to Any Business							
27.	Witl	hin 4 years before you filed for bankrup	otcv. c	lid vou own a business or have an	v of	the following connections to any	/ business?				
		☐ A sole proprietor or self-employed	•	•	-	-					
		☐ A member of a limited liability com				·					
		☐ A partner in a partnership	. ,	` ,	• `	,					
		☐ An officer, director, or managing ex	vecut	ive of a cornoration							
		☐ An owner of at least 5% of the votin		•							
		No. None of the above applies. Go to	•	. ,							
	_	Yes. Check all that apply above and file									
	Business Name			scribe the nature of the business	٠.	Employer Identification numbe	•				
	Address (Number, Street, City, State and ZIP Code)			Name of accountant or bookkeeper		Do not include Social Security number or ITIN.					
		igory Shtender physicia				Dates business existed EIN:					
	15	80 East 13th Street									

Official Form 107

Apt. 2D

Brooklyn, NY 11230

From-To October 2000 - present

Deb	tor 1 Grigory Shtender	C	case number (if known)
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed
	North Broadway Medical		EIN:
	2119 East 15th Street Brooklyn, NY 11229		From-To 6/21/12 - October, 2015, closed
	South Brooklyn Medical		EIN:
	2119 East 15th Street		Farm To 40/00/44
	Brooklyn, NY 11229		From-To 10/29/14 - present
	Dynamic Health Rehab C		EIN:
	3100 Broadway Fair Lawn, NJ 07410		From-To 4/25/14 - present
	Flatbush Medical Plaza		EIN:
	1468 Flatbush Avenue		From-To 5/2014 - present
	Brooklyn, NY 11210		Present
	■ No ■ Yes. Fill in the details below. Name	Date Issued	
	Address (Number, Street, City, State and ZIP Code)		
Part	12: Sign Below		
are t with 18 U		a false statement, concealing property, or	I declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both.
	gory Shtender ature of Debtor 1	Signature of Debtor 2	
Date	March 29, 2016	Date	
■ N		ent of Financial Affairs for Individuals Fili	ing for Bankruptcy (Official Form 107)?
☐ Y	es		
	ou pay or agree to pay someone who is no	ot an attorney to help you fill out bankrupte	cy forms?
■ N		unter Detition Dranguado Notico Designation	and Cinnature (Official Farm 440)
ЦY	es. Name of Person Attach the Bankro	uptcy Petition Preparer's Notice, Declaration,	and Signature (Official Form 119).

Fill	in this info	ormation to identify you	ır case:						
Deb	tor 1	Grigory Shtender							
	tor 2 buse, if filin	g)							
Unit	ed States E	Bankruptcy Court for the:	Eastern District of N	ew York					
Cas	e number nown)					☐ Check if	this is ar	n amended filing	
Off	icial F	orm 122B							
Ch	apter	11 Statement	of Your Cui	rrent Mo	onthly In	come			12/15
shee case	t to this fo number (i		mber to which the ad						
Part		Iculate Your Current Mo	<u> </u>						
1.	What is y	our marital and filing st	atus? Check one only	'.					
	☐ Not ma	arried. Fill out Column A,	, lines 2-11.						
	_								
	⊔ Marrie	d and your spouse is fi	ling with you. Fill out	both Columns	A and B, lines	2-11.			
	■ Marrie	d and your spouse is N	OT filing with you. Fi	Il out Column	A, lines 2-11.				
c a of in	ase. 11 U.S your mont come amo	verage monthly income S.C. § 101(10A). For exarthly income varied during unt more than once. For thing to report for any line	mple, if you are filing of the 6 months, add the example, if both spous	n September income for alses own the sa	15, the 6-month I 6 months and	period wou divide the to	ld be Mar otal by 6.	ch 1 through August 31 Fill in the result. Do not	. If the amount include any
						Column A Debtor 1		Column B Debtor 2	
2.	Your gros	ss wages, salary, tips, b	oonuses, overtime, ar	nd commissio	ons (before all	\$8,	600.00	\$	
3.		and maintenance paymer is filled in.	ents. Do not include p	ayments from	a spouse if	\$	0.00	\$	
4.	All amount of you or from an unand rooms	nts from any source wh your dependents, inclu married partner, membe mates. Include regular co o not include payments y	ding child support. In ers of your household, ontributions from a spo	nclude regula your depende	r contributions nts, parents,	\$	0.00	\$	
5.		ne from operating a	Debtor 1	Debtor 2					
		, profession, or farm eipts (before all deduction		\$ 0.00					
		and necessary operating	•	-\$ 0.00					
	•	nly income from a busines	•	\$ 0.00	Copy here ->	\$	0.00	\$	
6.		ne from rental and	Debtor 1	Debtor 2			_	_	
		l property	2.2.2	\$ 0.00					
		eipts (before all deduction	•	-\$ 0.00					
	-	and necessary operating aly income from rental or	•		Copy here ->	\$	0.00	\$	
		,			-				

Official Form 122B

Debtor 1 Grigory Shtender			Case	number (if known)		
			Colun Debto		Column B Debtor 2	
7. Interest, dividends, and royalties			\$	0.00	\$	
8. Unemployment compensation			\$	0.00	\$	
Do not enter the amount if you conter the Social Security Act. Instead, list it		as a benefit under	r			
For you	\$	0.00				
For your spouse	\$					
Pension or retirement income. Do not benefit under the Social Security Act.		ed that was a	\$	0.00	\$	
 Income from all other sources not Do not include any benefits received received as a victim of a war crime, a domestic terrorism. 	under the Social Security Act o	or payments				
If necessary, list other sources on a s	eparate page and put the total	below.				
Promisory note paymer	nts		\$	200.00	\$	_
Personal expenses cov	ered by business in		\$	4,000.00	\$	
Total amounts from separate	e pages, if any.	+	\$	0.00	\$	
11. Calculate your total current month	ly income.					
Add lines 2 through 10 for each colun	nn.					
Then add the total for Column A to th	e total for Column B.	\$1	2,800.	<u>00 </u>	=	12,800.00

Debtor 1	Grigory Shtender	Case number (if known)
	_	
Part 2:	Sign Below	
	By signing here, under penalty of perjury I	declare that the information on this statement and in any attachments is true and correct.
	V /o/ Crimony Chander	
	X /s/ Grigory Shtender	
	Grigory Shtender	
	Signature of Debtor 1	
D.	to March 20 204C	
D 6	March 29, 2016	
	MM / DD / YYYY	

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of New York

			L.	astern District of New Tork	a		
In re	Grigory Shte	nder		Debtor(s)	Case No. Chapter	11	
				Deotor(s)	Chapter		
	DIS	SCLO	OSURE OF COMP	PENSATION OF ATTORN	EY FOR DE	CBTOR(S)	
	compensation paid t	o me v	vithin one year before the f	016(b), I certify that I am the attorney filing of the petition in bankruptcy, or on of or in connection with the bankru	agreed to be paid	to me, for services rendered	l or to
	For legal service	es, I h	ave agreed to accept		\$	0.00	
	Prior to the fili	ng of tl		ed		0.00	
	Balance Due				\$	0.00	
2.	The source of the co		sation paid to me was:				
	Debtor		Other (specify):				
3.	The source of comp	ensatio	on to be paid to me is:				
	Debtor		Other (specify):				
4.	■ I have not agree	d to sh	are the above-disclosed co	ompensation with any other person unl	ess they are mem	pers and associates of my la	w firm
				ensation with a person or persons who names of the people sharing in the co			n. A
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 b. Preparation and c. Representation of d. [Other provision Negotiati reaffirma 	filing of the d s as ne ons w tion a	of any petition, schedules, selector at the meeting of cre seded] vith secured creditors t	endering advice to the debtor in determ statement of affairs and plan which manditors and confirmation hearing, and a to reduce to market value; exemations as needed; preparation ar household goods.	ay be required; any adjourned hea ption planning;	rings thereof; preparation and filing o	of
6.	Represer	tation		d fee does not include the following se dischargeability actions, judicia		es, relief from stay actio	ons or
				CERTIFICATION			
1	I certify that the forebankruptcy proceeding		is a complete statement of	f any agreement or arrangement for pa	yment to me for r	epresentation of the debtor(s	s) in
N	March 29, 2016			/s/ Alla Kachan			
I	Date			Alla Kachan 424428	1		
				Signature of Attorney Law Offices Of Alla	Kachan, P.C.		
				3099 Coney Island A			
				3rd Floor			
				Brooklyn, NY 11235 (718) 513-3145 Fax		;	
				alla@kachanlaw.co	. ,	•	
				Name of law firm			

United States Bankruptcy Court Eastern District of New York

In re	Grigory Shtender	Case No.		
		Debtor(s)	Chapter	11

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s) or attorney for the debtor(s) hereby verify that the attached matrix (list of creditors) is true and correct to the best of their knowledge.

3rd Floor

Brooklyn, NY 11235 (718) 513-3145 Fax: (347) 342-3156

USBC-44 Rev. 9/17/98

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI 48243

ALLY FINANCIAL 200 RENAISSANCE CTR DETROIT, MI 48243

AMEX
PO BOX 297871
FORT LAUDERDALE, FL 33329

AMEX
PO BOX 297871
FORT LAUDERDALE, FL 33329

APPLE BANK FIRST BANKCARD PO BOX 8580 OMAHA, NE 68108

BK OF AMER PO BOX 982235 EL PASO, TX 79998

CAPITAL ONE BANK USA N 15000 CAPITAL ONE DR RICHMOND, VA 23238

CAPITAL ONE BANK USA N 15000 CAPITAL ONE DR RICHMOND, VA 23238

CAPITAL ONE, N.A. PO BOX 30273 SALT LAKE CITY, UT 84130

CHASE CARD PO BOX 15298 WILMINGTON, DE 19850

CITI PO BOX 6241 SIOUX FALLS, SD 57117 CITIBANK
P.O. BOX 6241
SIOUX FALLS, SD 57117

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV 89193

CREDIT ONE BANK NA PO BOX 98875 LAS VEGAS, NV 89193

FNB OMAHA PO BOX 3412 OMAHA, NE 68103

IRS
PO BOX 9941
STOP 5300
OGDEN, UT 84409-0941

LEXUS FSB PO BOX 108 SAINT LOUIS, MO 63166

LIZA YOUNG 32 ESSEX ROAD GREAT NECK, NY 11023

NATIONAL GOVERMENT SERVI PO BOX 6160 INDIANAPOLIS, IN 46206

NATIONAL GOVERMENT SERVIC PO BOX 6160 INDIANAPOLIS, IN 46206

NYS DEPT OF TAX AND FIN W A HARRIMANCAMPUS ALBANY, NY 12227-0001

PETBRO MANAGEMENT CO 5418 5TH AVE BROOKLYN, NY 11220 SYNCB/PC RICHARD PO BOX 965036 ORLANDO, FL 32896

TOYOTA MOTOR CREDIT CO 1000 BRIDGEPORT AVE # 4T SHELTON, CT 06484

TOYOTA MOTOR CREDIT CO 1000 BRIDGEPORT AVE # 4T SHELTON, CT 06484

UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF NEW YORK

STATEMENT PURSUANT TO LOCAL BANKRUPTCY RULE 1073-2(b)

DEDIUK(5):	Grigory Siliender	CASE NO.:.
		3-2(b), the debtor (or any other petitioner) hereby makes the following disclosure knowledge, information and belief:
was pending at any spouses or ex-spous partnership and one have, or within 180	time within eight years before ses; (iii) are affiliates, as define or more of its general partner	or purposes of E.D.N.Y. LBR 1073-1 and E.D.N.Y. LBR 1073-2 if the earlier case the filing of the new petition, and the debtors in such cases: (i) are the same; (ii) are ed in 11 U.S.C. § 101(2); (iv) are general partners in the same partnership; (v) are a s; (vi) are partnerships which share one or more common general partners; or (vii) f either of the Related Cases had, an interest in property that was or is included in the a).]
□ NO RELATED	CASE IS PENDING OR HAS	BEEN PENDING AT ANY TIME.
■ THE FOLLOW	ING RELATED CASE(S) IS I	PENDING OR HAS BEEN PENDING:
1. CASE NO.: 1- 1	6-40716-cec	rla E Craig DISTRICT/DIVISION: Eastern District of New York
DEBTOR NAME:	Natalya Yelin	
CASE STILL PENI	DING (Y/N): Y	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED	(Refer to NOTE above): Spouse
	LISTED IN DEBTOR'S SCH OF RELATED CASE:	IEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
2. CASE NO.:	JUDGE: DISTRIC	CT/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:
CURRENT STAT	US OF RELATED CASE:	
		(Discharged/awaiting discharge, confirmed, dismissed, etc.)
MANNER IN WH	ICH CASES ARE RELATED	(Refer to NOTE above):
	LISTED IN DEBTOR'S SCH OF RELATED CASE:	IEDULE "A" ("REAL PROPERTY") WHICH WAS ALSO LISTED IN
3. CASE NO.:	JUDGE: DISTRIC	CT/DIVISION:
CASE STILL PENI	DING (Y/N):	[If closed] Date of closing:

DISCLOSURE OF RELATED CASES (cont'd)	
CURRENT STATUS OF RELATED CASE: (Discharged/a	waiting discharge, confirmed, dismissed, etc.)
,	
MANNER IN WHICH CASES ARE RELATED (Refer to NOTE abo	ve):
REAL PROPERTY LISTED IN DEBTOR'S SCHEDULE "A" ("REAL SCHEDULE "A" OF RELATED CASE:	L PROPERTY") WHICH WAS ALSO LISTED IN
<i>NOTE:</i> Pursuant to 11 U.S.C. § 109(g), certain individuals who have he be eligible to be debtors. Such an individual will be required to file a state of the sta	
TO BE COMPLETED BY DEBTOR/PETITIONER'S ATTORNEY, A	AS APPLICABLE:
I am admitted to practice in the Eastern District of New York (Y/N): _	Υ
CERTIFICATION (to be signed by pro se debtor/petitioner or debtor/p	petitioner's attorney, as applicable):
I certify under penalty of perjury that the within bankruptcy case is not as indicated elsewhere on this form.	related to any case now pending or pending at any time, except
/s/ Alla Kachan	
Alla Kachan 4244281 Signature of Debtor's Attorney Law Offices Of Alla Kachan, P.C. 3099 Coney Island Avenue	Signature of Pro Se Debtor/Petitioner
3rd Floor Brooklyn, NY 11235 (718) 513-3145 Fax:(347) 342-3156	Signature of Pro Se Joint Debtor/Petitioner
	Mailing Address of Debtor/Petitioner
	City, State, Zip Code
	Area Code and Telephone Number

Failure to fully and truthfully provide all information required by the E.D.N.Y. LBR 1073-2 Statement may subject the debtor or any other petitioner and their attorney to appropriate sanctions, including without limitation conversion, the appointment of a trustee or the dismissal of the case with prejudice.

<u>NOTE</u>: Any change in address must be reported to the Court immediately IN WRITING. Dismissal of your petition may otherwise result.

USBC-17

Rev.8/11/2009